PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional) 015280-405100US	
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				
Application Number 10/088,952			Filed March 22, 200	2
For MUTATED ANTHRAX TOXIN PROTECTIVE ANTIGEN PROTEINS THAT SPECIFICALLY TARGET CELLS CONTAINING HIGH AMOUNTS OF CELL-SURFACE METALLOPROTEINASES OR PLASMINOGEN ACTIVATOR RECEPTORS				
Art Unit 1642			Examiner Brandon J. Fetterolf	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ <u>450</u>
	Three months (37 CFR 1.17(a)(3))	\$1020	\$ 510	\$
	Four months (37 CFR 1.17(a)(4))	\$1590	\$ 795	\$
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
	Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed.			
	Payment by credit card. Form PTO-2038 is attached.			
\boxtimes	The Director has already been authorized to charge fees in this application to a Deposit Account.			
	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card Information and authorization on PTO-2038.			
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
	attorney or agent of record. Registration Number <u>57,471</u>			
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34				
	9 ene H. Yee			
-	Signature		Date	
_	Gene H. Yee, Reg. No. 57,471		(925) 472-5000	
Typed or printed name			Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
\Box	Total of forms are sub	omitted.		